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Revision: HCFA-PM-92-3 (HSQB)

APRIL 1992

OMB No.:

State/Territory: New York 4.40 Survey & Certification Process Citation Sections 1919(g)(1)The State assures that the requirements of 1919(g)(1)(A) through (C) and section thru (2) and 1919(g)(2)(A) through (E)(iii) of the Act 1919(3)(4) which relate to the survey and thru (5) of the Act P.L. certification of non-State owned facilities based on the requirements of 100-203 section 1919(b), (c) and (d) of the Act, (Sec. 4212(a)) are met. The State conducts periodic education programs for staff and residents (and 1919(g)(1) (5) (3) of the their representatives). Attachment 4.40-A Act describes the survey and certification educational program. 1919(g)(1) The State provides for a process for the (c) receipt and timely review and (C) of the Act investigation of allegations of neglect and abuse and misappropriation of resident property by a nurse aide of a resident in a nursing facility or by another individual used by the facility. Attachment 4.40-B describes the State's process. 1919(g)(1) (d) The State agency responsible for surveys and certification of nursing facilities or (C) of the an agency delegated by the State survey agency conducts the process for the receipt and timely review and investigation of allegations of neglect and abuse and misappropriation of resident property. If not the State survey agency, what agency? 1919(g)(1) The State assures that a nurse aide, found (e)(C) of the to have neglected or abused a resident or misappropriated resident property in a Act facility, is notified of the finding. The name and finding is placed on the nurse aide registry. The State notifies the appropriate 1919(g)(1) (\pm) licensure authority of any licensed (C) of the individual found to have neglected or Act

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Approval Date JAN 3 1 1995

Effective Date APR 1 - 1992

abused a resident or misappropriated resident property in a facility.

HCFA ID:

790

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(ESQB)

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1919(g)(2) (A)(i) of the Act

The State has procedures, as provided for at section 1919(g)(2)(A)(1), for the scheduling and conduct of standard surveys to assure that the State has taken all reasonable steps to avoid giving notice through the scheduling procedures and the conduct of the surveys themselves.

Attachment 4.40-C describes the State's procedures.

1919(g)(2) (A)(ii) of the Act (h) The State assures that each facility shall have a standard survey which includes (for a case-mix stratified sample of residents) a survey of the quality of care furnished, as measured by indicators of medical, nursing and rehabilitative care, dietary and nutritional services, activities and social participation, and sanitation, infection control, and the physical environment, written plans of care and audit of resident's assessments, and a review of compliance with resident's rights not later than 15 months after the date of the previous standard survey.

1919(g)(2) (A)(iii)(I) of the Act

(i) The State assures that the Statewide average interval between standard surveys of nursing facilities does not exceed 12 months.

1919(g)(2) (A)(iii)(II) of the Act

(j) The State may conduct a special standard or special abbreviated standard survey within 2 months of any change of ownership, administration, management, or director of nursing of the nursing facility to determine whether the change has resulted in any decline in the quality of care furnished in the facility.

1919(g)(2) (B) of the Act

(k) The State conducts extended surveys immediately or, if not practicable, not later that 2 weeks following a completed standard survey in a nursing facility which is found to have provided substandard care or in any other facility at the Secretary's or State's discretion.

1919(g)(2) (C) of the Act (1) The State conducts standard and extended surveys based upon a protocol, i.e., survey forms, methods, procedures and guidelines developed by HCFA, using individuals in the survey team who meet minimum qualifications established by the Secretary.



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1919(g)((D) of t: Act		(m·	reduce inconsiste survey results as	es for programs to measure and ency in the application of mong surveyors. Attachment the State's programs.
1919(g)((E)(i) o the Act		(=;		multidisciplinary team of cluding a registered se.
1919(g)((E)(ii) the Act		(C)	io not serve (or previous two year consultant to the	s that members of a survey team have not served within the rs) as a member of the staff or e nursing facility or has no lial financial interest in the urveyed.
1919(g)((E)(iii) the Act	of	(5)	as a member of a individual has sand test program	es that no individual shall serve in survey team unless the successfully completed a training in survey and certification eved by the Secretary.
1919(g)(of the A	4) act	(g)	staff to investi requirements by	ins procedures and adequate gate complaints of violations of nursing facilities and onsite cachment 4.40-E describes the procedures.
1919(g)((A) of t Act		(1)	information responds facilities deficiencies, places reports, st	available to the public pecting surveys and certification lities including statements of lans of correction, copies of latements of ownership and the closed under section 1126 of the
1919(g) (B) of t Act		(5)	ombudsman of the compliance with subsection (b),	ies the State long-term care State's finding of non- any of the requirements of (c), and (d) or of any adverse gainst a nursing facility.
1919(g) (C) of Act		(=)	in a facility, physician of ea	nds substandard quality of care the State notifies the attending ch resident with respect to which made and the nursing facility icensing board.
1919(g) (D) of Act		(u)	abuse agency ac	des the State Medicaid fraud and cess to all information ey and certification actions.

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TN No Z	Approval	Date JAN 3 1 1995	Effective		APR 1 - 1992
TN NO. New			HCFA	ID:	